

MARCO Enrolment Form

MARCO Trust Kids' and Youth Arts Term and Holiday Programmes 2008-09

Surname _____

Name of 1st Child _____

School _____ Year _____ Age _____

Name of 2nd Child _____

School _____ Year _____ Age _____

Allergies (if any) _____

Term Programmes (tick a box)

	Term 1	Term 2	Term 3	Term 4
Monday (Art)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday (Art)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday (Art)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday (PLAY)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Holiday Programmes (tick a box)

	January	April	July	Sept/Oct	Dec
Kids - Week 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Kids - Week 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Youth - Week 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Youth - Week 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Contact details

Parent/Guardian _____ Address _____

Home Tel _____ Mobile _____ Email _____

Payment details

Term Programmes \$125 PLAY \$95 Holiday Programmes \$135 (\$110)

- By cheque
- By cash
- By internet direct debit/bill payment:

Account name: MARCO Trust, Account number: 12-3020-0456391-00

Amount _____ Type of payment _____

Please read and sign Terms & Conditions below.

Return signed form with payment to the address below.

Terms & Conditions

I, _____ NAME of _____

_____ ADDRESS

('the parent or guardian') agree to be bound by the following terms and conditions of the MARCO TRUST ('the School') art classes in relation to art classes that the School will provide

_____ NAME OF CHILD(REN)

1. The Parent or Guardian will collect the child(ren) at the end of the art class/PLAY/Holiday Programme and no later than 10 minutes from the end of the class.
2. The Parent or Guardian agrees that the child(ren) may only be collected by him/herself or the person(s) listed below provided that such person(s) are able to produce photo identification to the School if requested:

_____ NAME(S)

3. In the event a child will not be collected from the School the Parent or Guardian agrees it will provide consent allowing the child to leave the school's premises. The Parent or Guardian acknowledges that the School or agents will not be responsible whether in contract or negligence for any harm or injury caused to or suffering by the child in the event that the Parent or Guardian provides such consent.
4. The Parent or Guardian acknowledges that the School or its agents will not be responsible whether in contract or negligence for any harm or injury caused to or suffered by any or all child(ren) due to the negligence of the School or its agents in the event that the Parent or Guardian fails to collect or arrange for their child(ren) to be collected at the end of any class.
5. Enrolment fees shall not be refunded after the date of term commencement for which the child(ren) is enrolled.

Consent

6. Please tick the box if you consent to your child(ren)'s artwork being photographed and activities in the Children's Art Programme being photographed. Images may be used for publicity purposes such as MARCO Trust brochures, website and/or trade shows.

Signed _____ Parent or Guardian _____

Print Name _____ Date _____